Sep. 21. 2010 6:26PM	No. 9255 P. 2
	226013
STATE OF SOUTH CAROLINA	)
(Caption of Case)  Example: Application for a Class C Charter Certificate from  John Doe dba Doe's Limo	) BEFORE THE ) PUBLIC SERVICE COMMISSION ) OF SOUTH CAROLINA
Application for a Class C Taxi from	) TRANSPORTATION COVER SHEET
Earthalene Carter Nicks	) DOCKET NUMBER: 2010 329 . T
	) If this is your first time filling an application with the PSC, you will not
	have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print) Submitted by: Earthalene Carter Nicks	Telephone: 843-708-12,96
Address: 193-B Congress St	Fax:
Charleston, SC 29403	Other:
	7719
NOTE: The cover sheet and information contained herein neither replace as required by law. This form is required for use by the Public Service be filled out completely.	Email:  os nor supplements the filing and service of pleadings or other papers  Commission of South Carolina for the purpose of docketing and must
NATURE OF ACTION	(Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	
Application - Class C Chorter	Request to Amend Scope of Authority
☐ Application ~ Class C Charter Bus   RECEN	Request to Amend Tariff (rate increase, etc.)  Request to Amend Passenger Limit
Application - Class C Non-Emergency SEP 2 1	
Application - Class C Stretcher Van	1 ) Exhibit
Application - Class E Household Goods CLERK'S OF	FICE Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Reservation Letter
••	Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	Other:
Request for Reinstatement	
If you have any questions about this form, please contact the Pl	TRY IC SERVICE COAR GODION AND TO
· · · · · · · · · · · · · · · · · · ·	- XIV
n Print Form	Reset Form

## PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

#### 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

# APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

- A 21-10		
RECEIVED Date: 9-21-10		
CLASS C - TAXI SEP 2 1 2010		
Application is hereby made for a Certific <b>DEST KINGS</b> Classify. In accordance with the of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.	provision	
1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without to	rade name.)	
Eartholive Carter WICH		
193-B Congress St Charleston, SC.  Street Address of Applicant	29403	
Mailing Address of Applicant if different from street address		
803.708.12.96 Phone Fax		
Email Address		
2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, att Secretary of State "Foreign Corporation" Certificate.)	ach SC	
3. Select Entity Type: (Check one)		
Individual Owner/Sole Proprietorship		
Partnership - List names and address of all person having an interest in the business.		
Corporation - List names and addresses of two principal officers.		

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

#### **BALANCE SHEET**

Balance	at Time Applica	ntion is l	Filed:
Month	Supt	Year	2010

Assets:

Cash	500.00
Receivables	
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	3000.00
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepaids and Other Assets	
Total Assets	3500.00
Liabilities and Equity:	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity	3500.00

# PROPOSED RATES AND CHARGES FOR SERVICE

De la Character de Carrier en ca follower		
Maximum Proposed Rates and Charges for Service are as follows:		
# 5.00 Taxi mile		
Counties to be Served: Statewall		
Maximum Number of Passengers per Vehicle:		
7		

## DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Dodge	2001 CUruran	184CP25B21824C	931	7
			<b>3.7.</b> 4	
	•			
		-		= 14 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4
	NOTE OF THE PARTY			
			······································	. :

## INSURANCE QUOTE

his form <u>MUST BE COMPLETED AND SIGNED</u> by an <u>AUTHORIZED INSURANCE COMPANY REPRESENTATI</u>
The following insurance quote is for:
Name of Motor Carrier  193. B Congress St Charleston SC 29403  Address of Motor Carrier
Address of Motor Carrier
Amount of Premium: Limits Quoted: (See Below)
Liability Insurance \$ $\frac{2960.00}{}$ Limits $\frac{25/50/25}{}$
The above quoted premium is for a term of months.
Minimum Limits - Intrastate Only:  1-7 Passengers \$ 25,000/50,000/25,000  8-15 Passengers \$ 25,000/100,000/25,000
Starvet Ins Conpany Name of Insurance Company
1245 Colebration Black Florence; SC 29501 Home Office Address of Company
I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.
Date Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

## Exhibit FWA

		Name of Applicant
1.	• •	outstanding judgments against the Applicant?
	O Yes	
	If Yes, indicate nature	of judgement(s) against applicant.
		ith all statutes and regulations, including safety regulations and governing for-hire motor uth South Carolina, and does Applicant agree to operate in compliance with these?
	<b>⊘</b> Yes	○ No
3.	Is Applicant aware of the	ne Commission's insurance requirements and the insurance premium costs associated
	therewith?	
	Yes	○ No

# Exhibit on Driver Qualifications

1	1. Applicant understands that all drivers must be a minimum of 18 years of age.			
	<b>Ø</b>	Yes	С	No
2.	and si	cant understands that uch record from the D intained in the Appli	VΜC	rtified copy of the driver's three (3) year driving record issued by the SC DMV of the state in which the driver is or has been domiciled for such period must s business office.
	<b>②</b>	Yes	0	No
3,	Applie must l	cant understands that be maintained in the A	a cri Appli	minal history background check from the state where the driver currently lives cant's business office.
	<b>②</b>	Yes	0	No .
4.	their p	eant understands that ossession when opera f residence of the driv	ating	rivers operating a vehicle under a Class C Taxi Certificate must have in a charter vehicle, a valid driver's license issued by the SC DMV or the current
	•	Yes	0	No
	vehicle	es to drivers who are	regis	lass C Taxi Certificate holders are prohibited from employing or leasing tered, or required to be registered, as sex offenders with the South Carolina or any national registry of sex offenders.
	<b>(3</b> )	Yes	O	No

#### Public Service Commission of South Carolina Post office drawer 11649 Columbia, South Carolina 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance

STATE OF SOUTH CAROLINA ) COUNTY OF <u>Coulstral</u>	Ear Maline C. Andreward Applicant's Signature
of Earthlene Curter	NICLES
affirm that all statements contained in the above a	9
SWORN TO BEFORE ME This 21 Jay of September, 2010  Volary Public V	The property of the property o
commission Expires 2-17-2019	

Carolina Carolina Carolina September 21, 2010

Public Service Commission State of South Carolina 1401 Main Street Columbia, South Carolina 29201

SEP 2 1 2010

PSC SC CLERK'S OFFICE

Attn: Clerk Office

Re: Application for Class C Taxi Earthalene C. Nicks

To Whom It May Concern:

I, Earthalene C. Nicks, am asking to have my application expedited. On August 31, 2010, I received my application from Tammy Poston at Commercial Insurance Services, Inc. The application was completed and returned via Fax on the same day. I had been informed that the process would take approximately 2-3 weeks. After waiting the appropriate time, I contacted Ms. Poston for the results. I was informed that she never received the fax.

On Friday, September 24, 2010, all financial responsibility will be completed with current owner and transfer of title will take place. I am seeking insurance finalization and hoping to move forward with legally operating as an owner.

I would appreciate any and all assistance in getting this matter completed as soon as possible.

Thank you so much

Earthalese C Nicks
Earthalene C. Nicks